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TRANSMITTAL FORM

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Total Number of Pages in This Submission

12

Application Number	10/770,606
Filing Date	02/03/04
First Named Inventor	PHILIP CHIDI NJEMANZE
Art Unit	3768
Examiner Name	JAWORSKI, FRANCIS J

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Remarks <p style="text-align: center;">F9 5 and 6. CLAIMS</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	PHILIP CHIDI NJEMANZE		
Signature			
Printed name	PHILIP CHIDI NJEMANZE		
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U.S. Patent Application No. 10/770,606
Art Unit 3768

Applicant: Njemanze Philip Chidi
Examiner Jaworski Francis J.

Response to Office Action Dated 11/13/2006

1. Claims 1-20 are now renumbered 21-40. Each claim has been provided with the proper status identifier.

The drawings are now properly identified in the top margin as "Replacement Sheet".

I thank you in anticipation.
Yours truly,

A handwritten signature in black ink, appearing to read "Njemanze".

Dr Philip C. Njemanze December, 5th 2006.